Norridge Police Department

Accident Review Board

Date assigned	Member	Present	Excused	Unexcused
5/1/2003	Sgt.Orlando	X		
5/1/2003	Sgt. Schober	X		
12/1/2012	Off. Turano	X		
5/1/2003	Off. Malicki	x		

Review Date: 05/19/2016

M/V Crash: 16-05373

Officer: Probationary A/O Rein#47

Squad #508

1.Classification1.

- a. The incident was NON-PREVENTABLE and the employee was not at fault. Caution was apparently excercised.
- b. The employee was legally parked or standing.
- c. The employee was aware of the impending hazard, was alert to the consequences and skillful in minimizing the effect of the hazard.
- d.In incidents the board resolves to be Classification I,no disciplinary action will be taken.

2. Classification II.

- a. The employee failed to exercise reasonable and due care.
- b. The employee deviated inexcusably from Dept. Rules and Regulations, Procedures and/or General Safety Practices. procedures and/or general safety practices.
- c.In incidents the board resolves to be Classification II, disciplinary action recommended may be:
- (i) For the very first incident of record for the employee in a rolling 24 month period, a letter of reprimand will be issued and attendance and successful completion of a "Defensive Driving Course may be ordered. Only one letter of reprimand may be issued during the 24 month period in which the incident occurred.
- (ii)For a second Classification II finding by the board in the 24 month period a 2 day suspension without pay shall be imposed.
- (iii) For a third Classificaton II finding by the board in a 24 month period, a 3 day suspension without pay shall be imposed.

Recommendation: The board unanimously agreed 2a. A/O Rein struck a parked motorcycle.

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INVESTIGATING AGENCY NORRIDGE	DAMAGE TO ANY \$500 OR LESS ONE PERSON'S \$501 \$1,500 VEHICLE PROPERTY OVER \$1,500	TYPE OF REPORT ON SCENE NOT ONLY OF SECURITY OF SECURI	or Tow Due To Crash	ency crash report no.
ADDRESS NO. HIGHWAY or	STREET NAME AND AND	RELATED Y N	1100	LARS CODE OZM UT
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11				7
,	DECORPORAÇÃO NAME	DAMAGED PROPERTY	CONTRIBUTIORY	POSTED U2
N T THE STATE OF	PROPERTY OWNER NAME	CITY STATE	ZIP PRIMARY	SPEED DID CRASH OCCUR TY IN A WORK ZONE?
T 2 D		SECTION CITATION NO.	SECONDARY	20 IF YES CHECK ONE BELOW
		SECTION CITATION NO.	. ((MAINTENANCE UTILITY
R 1		BEAT/DIST: SUPERVISOR ID 109	DATE POLICE NOTIFIED	8 39 AM ZUNKNOWN WORKZONE TYPE
7 2		1 Ath	COURT DATE mo /day /yr	COURT TIME AM WORKERS PRESENT? N

REMEMBER TO USE BLACK INK, PRESS HARD, PRINT LEGIBLY AND COMPLETE ALL REQUIRED FIELDS!

Diagram and Neven if units have	larrative are required on all To	ype B crashes, cer's arrival.	27	Commercial motor vehicle (CMV)	
14500 OZANOAH		(TE NORTH PARROW 1	IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A ADDITIONAL UNITS FORMS. A CMV is defined as any motor vehicle used to transport passengers or property and: 1. Has a weight rating of more than 10,000 pounds (example: truck	
SUNNYSIDE	C	or truck/trailer combination); or 2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or			
	9/			3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or	
				4. Is used or designated to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or	
OZANAH Are	9.			 Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle). 	
	4504 N.			CARRIER NAME	
	OZANAM	Not to scal	ė	ADDRESS	
NARRATIVE (Refer to vehicle by Unit No.)	1.1.12:1	1. 1. Pata		CITY/STATE/ZIP	
In summany: Unit 2 pas	luit I was to	Jest in front on		USDOT NOILCC NO	
4504 N. OZANAM dre. S	ZANAH	Source of above info. $\ \square$ Side of Truck $\ \square$ Papers $\ \square$ Driver $\ \square$ Liog Book			
	Bar 1	Gross Vehicle Weight Rating (GVWR)			
Unit 13, windshield to	1	Were HAZMAT placards displayed on the vehicle?			
humper made contact	e,	If yes, name on placard1-digit Hazard Class no			
1/2/2/	Pall on its lo	A side.		Did HAZMAT spill from the vehicle (do not consider fuel from the	
cousing unit 2 to +			://	vehicle's own tank)?	
	that I received damage to the left side with				
receired damage	er.	Did Motor Carrier Safety Regulations (MCS) violation contribute to the crash? ☐ Y ☐ N ☐ UNK			
				Was a Driver/Vehicle Examination Report form completed? HAZMAT □ Y □ N □ UNK Out of Service? □ Y □ N MCS □ Y □ N □ UNK Out of Service? □ Y □ N Form No	
				IDOT PERMIT NO WIDE LOAD? ☐ Y ☐ N TRAILER WIDTH(S): 0-96" 97-102" >102" TRAILER 1 ☐ ☐ ☐ TRAILER 2 ☐ ☐ ☐	
LOCAL USE ONLY				TRAILER LENGTH(S): 1ft TRAILER 2ft TOTAL VEHICLE LENGTHft NO. OF AXLES	
U1 Color Lotute U2 Color Orange	U2 Yowed by / to			SELECT CODES FROM BACK COVER OF CRASH BOOKLET: VEHICLE CONFIGURATION CARGO BODY TYPE LOAD TYPE	
Ut Towed by / to		·		5,2100 5051 TH C 5576 TH C	